

DALLAS:75329/74019:1304147v1

Accordingly, herein transmitted is a copy of the filed Statement, along with a copy of the return receipt postcard stamped by the USPTO, for the Examiner's review and consideration.

Respectfully submitted,



Kristen R. Paris

Registration No. 52,092

Date: July 30, 2004
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AUG 10 2004

TECHNOLOGY CENTER 3700

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Group Art Unit: 3763

Examiner: Rodriguez

For **CAP OPERATED RETRACTABLE
MEDICAL DEVICE**

I hereby certify that the papers enclosed herein are being deposited with the United States Postal Service as First Class Mail, with postage prepaid, on the date set forth below in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date of Mailing 4/13/04

4/13/04
Date of Signature

Kristen R. Paris, Registration No. 52,092
Attorney for Applicant

Pursuant to the duty of disclosure under 37 C.F.R. §1.56, Applicants submit this supplemental Information Disclosure Statement to provide copies of references cited in a supplemental Search Report issued March 8, 2004 in the corresponding European application. This submittal is made in accordance with 37 C.F.R. §§1.97 and 1.98 and §609 of the Manual of Patent Examining Procedure. The patents, publications and

other information herein are listed on the attached Form PTO/SB/08B. Copies of the listed references are submitted herewith.

Applicants hereby expressly reserve the right to swear behind the effective dates of any of the above patents and other publications and to question the relevance and materiality of the Patents and Publications listed herein, in whole, in part, or in combination, subsequent to filing this Information Disclosure Statement.

It is believed no fee is due for submission of this paper. If this is incorrect, the Commissioner is hereby authorized to charge any fee due to Locke Liddell & Sapp LLP Deposit Account No. 12-1781.

Respectfully submitted,



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Approved for use through 07/31/2006. OMB 0651-0031

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Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Complete if Known

Application Number	09/665,634
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Filing Date	September 19, 2000
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First Named Inventor	Thomas J. Shaw
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Art Unit	3763
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Examiner Name	Rodriguez
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Attorney Docket Number	75329 / 74019
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Sheet 1

of 1

U. S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (<i>If known</i>)			
		US- 5,480,385	01-02-1996	Thorne et al.	
		US-			
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FOREIGN PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		Country Code ³ Number ⁴ Kind Code ⁵ (if known)				
		WO 96/05879 A1	02-29-1996	New Med. Tech.		
		EP 0 539 634 A1	05-05-1993	Care Med. Dev.		

**Examiner
Signature**

Date
Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND

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Attorney: KRP/dd
Title: CAP OPERATED RETRACTABLE
MEDICAL DEVICE

Client/Matter No. 75329 / 74019
Reissue of Patent No.: 5,810,775

Applicants: Shaw et al.

Today's Date: 04/13/04

**Enclosed for filing in the United States Patent and Trademark Office
via first class mail are the following:**

1. Transmittal of Supplemental Information Disclosure Statement;
2. Supplemental Information Disclosure Statement;
3. Copies of cited references; and
4. Postcard acknowledgement.

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Attorney: KRP/dd

Client/Matter No. 75329 / 74019

Title: CAP OPERATED RETRACTABLE
MEDICAL DEVICE

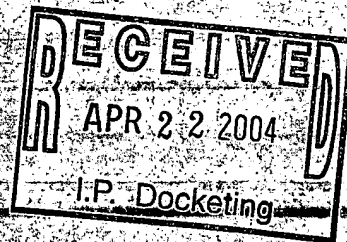
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